

Massachusetts is well positioned, with experience from past and current long term care system rebalancing initiatives, to bring extensive expertise to the Money Follows the Person (MFP) planning process. Planning Grant funds will supplement existing state resources and support the development of a Draft Operational Protocol (Draft OP) that meets the requirements of the 2011 MFP Demonstration, actively engages the aging and disability communities, and secures support for ongoing and developmental community based long term care opportunities. Planning Grant funds will be managed by the University of Massachusetts Medical School (UMMS) and will support the program, policy, and data analytics and stakeholder engagement necessary to develop a Draft OP.

Massachusetts was an early leader in developing supports for community living. In 1974, the state established a fully consumer-directed personal care attendant program. The state further increased accessibility to and utilization of community-based services by offering other optional Medicaid long term care services through its state plan, and implementing eight 1915(c) Home and Community-Based Services Waivers that support children with autism, adults with intellectual disabilities and brain injuries, and frail elders. Further, recent decisions about the closure of certain institutions have facilitated the development of community based resources, while enhanced Aging and Disability Resource Consortia have laid the groundwork for coordinated information and referral services. This rich history, and additional experience gained from administering state and federal grants, such as the CMS Systems Transformation Grant, lay the groundwork for comprehensive planning and implementation of a n MFP Demonstration.

Planning Grant resources will be used to identify eligible populations, determine how best to support community transition and provide such services, accurately forecast the financial

implications of innovations and sustainability requirements of MFP-related activities, and complete required elements of the Draft OP. The state will assess the feasibility of related Patient Protection and Affordable Care Act (PPACA) and other opportunities, including for expanded consumer direction. The Planning Grant process will allow for a thorough assessment of the state's readiness to participate in the MFP Demonstration.

Long term care system rebalancing activities are supported by Governor Deval Patrick's Administration. The state's *Community First* Olmstead Plan clearly articulates *Community First* as the state's long term care policy. Massachusetts will engage its Standing Olmstead Plan Advisory Committee, a knowledgeable group of disability and elder consumers, advocates, and providers. Stakeholder engagement will include targeted meetings around the Commonwealth, with transportation and other support provided as needed, and web-based access to ongoing planning updates and communications at [www.mass.gov/communityfirst](http://www.mass.gov/communityfirst).

Senior members of the state's elder affairs, disability, and Medicaid offices will provide the active leadership needed to assure full integration of MFP strategies with other current and developing long term and acute care initiatives. UMMS MFP Project Director, Stephanie Anthony, former Deputy Director of the Office of Medicaid, brings extensive experience focused on state and national health care reform, Medicaid long-term care financing, and Medicaid and Medicare populations. Other UMMS staff and contractors will provide the program, business, IT and other analytics necessary to assure the successful development of an effective Draft OP.